



Fort Belknap Tribal Land Department

LIVESTOCK CROSSING PERMIT

656 Agency Main Street
Harlem, MT 59526
Phone (406) 353-8443
Fax (406) 353-4653

Agency: Fort Belknap

Dated: _____

Reservation: Fort Belknap Indian Community

Permission is hereby granted to:

(Name)

(Address)

To drive livestock across the above reservation entering the reservation on ____/____/_____, and exiting no later than ____/____/_____, and using the following route: _____

This permit is subject to all applicable state and federal laws and regulations dealing with quarantine and the movement of livestock and to such special instructions as may be issued by the Land Department Director or his/her duly authorized representative. No authority is granted to cross trust Indian lands unless specifically set out in this permit. In consideration of the permission granted herein, the permittee shall pay in advance the sum of \$ _____

Issued by the above Department this _____ day of _____, _____

Approved:

Accepted:

(Director/Authorized Rep)

(Permittee)

This information is collected to manage agriculture and grazing leases. The information is supplied by a respondent to obtain or retain a benefit, that is, a lease. It is estimated that responding to the request will take an average of 20 mins to complete. This includes the amount of time it takes to understand directions, gather the information and fill out the form. If you wish to make comments on the form, please send them to the Tribal Land Department (address above). Note: comments, names and addresses of commenters are available for public review during regular business hours. If you wish us to withhold this information, you must state this prominently at the beginning of your comment. We will honor your request to the extent allowable by law.

LAND – OUR LAND IS OUR TERRITORY. It is not just where we live, and farm, and work, but it is who we are. Without it we have no past and no future, no Indian way of life today. Our conflicts and our troubles have always been about the land...



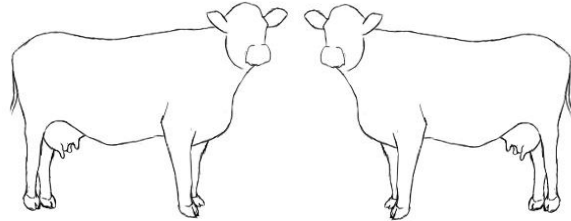
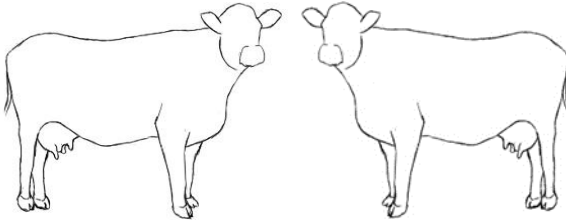
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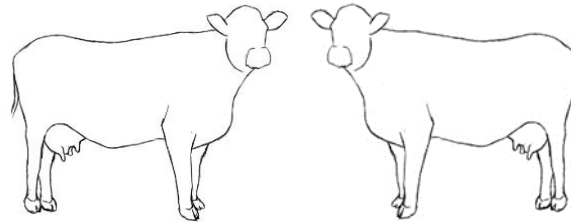
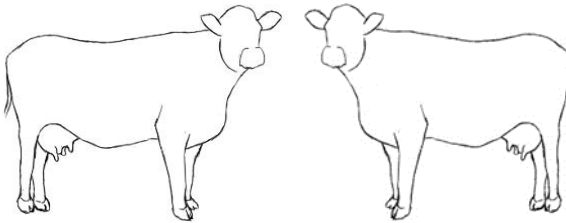
Name: _____
No. of head per brand _____

Name: _____
No. of head per brand _____



Name: _____
No. of head per brand _____

Name: _____
No. of head per brand _____



For Bulls: A Copy of the Trichomoniasis test signed by a veterinarian is required for each bull before the bull(s) are allowed to enter the reservation, FBIC Ordinance No. 1-90, section 103, sub-section

Date of copy received: _____ Copy must be attached.

Compliance of Fence Line

Date of compliance check: _____

Conditions: _____

Approval for use: _____ (Name) _____ (Title)

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